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01/30/2008

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TYSONS CORNER, VA 22182		APR	³` <i>\$</i>   [				(Depositor's name)
		3	THE PARTY OF THE P				(Signature)
	•	EMT 8	TRADE			·	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	D INVENTOR		DOCKET NO.	CONFIRMATION NO.
. 10/615,946	07/10/2003		Sami Tilander		60279.00142		1099
TITLE OF INVENTION	N: ADAPTIVE CONNEC	CTION CACHE FOR CO	MMUNICATION NETW	ORKS <sub>05/01/2008</sub>	HVUONG2	00000050 1061	5946
				01 FC:1501 02 FC:1504			1440.00 OP 300.00 OP 30.00 OP
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	. \$300	\$0		\$1740	04/30/2008
EXAMINER		ART UNIT	ART UNIT CLASS-SUBCLASS				
DUONG, OANH L		2155	709-224000	<b>-</b>			
1. Change of correspond CFR 1.363).	ence address or indicatio	2. For printing on the patent front page, list Squire, Sanders					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to or agents OR, alternati	vely,	•	& Demps	
The Address indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-0 Number is required.	D2 or more recent) attach	ed. Use of a Customer	Customer 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	L	pe)			
PLEASE NOTE: Un	less an assignee is ident	ified below, no assignee	data will appear on the p	atent. If an assigne	e is identif	ied below, the do	ocument has been filed for
(A) NAME OF ASSI		nedon of this form is two	(B) RESIDENCE: (CITY			•	
NOKIA COR	PORATION		KEILALAHDEN	•		•	
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Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual <b>KX</b> Co	rporation or	other private gro	up entity Government
4a. The following fee(s)	are submitted:	41	Payment of Fee(s): (Plea			y paid issue fee s	shown above)
☐ Issue Fee ☐ ☐ A check is enclosed. (Ck # 018638) ☐ Payment by credit card. Form PTO-2038 is attached.							
Advance Order -		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2222 (enclose an extra copy of this form).					
			overpayment, to Depo	osit Account Number	r <u>50–22</u>	22_ (enclose ar	n extra copy of this form).
<ol> <li>Change in Entity Sta</li> <li>a. Applicant claim</li> </ol>	tus (from status indicated is SMALL ENTITY statu	,	☐ b. Applicant is no lon	ger claiming SMAL	L ENTITY	status. See 37 CF	FR 1.27(g)(2).
				-			e assignee or other party in
Authorized Signature	Z1x			í	il 30,		
Typed or printed nam	e Brad Y. Chi	n	•	Registration No			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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